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FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

		For Other Than An Authorized Committee						Office Use Only			
1.	NAME OF COMMITTEE (in full)		EC MAILING LAE PE OR PRINT	_	xample:If typi ver the lines	ng, type					
L	Freedom and Security Pac	1 1 1					1 1 1				
Ш											
ADDRESS (number and street)		1117	1117 Atwood Ct								
	Check if different										
L	than previously reported. (ACC)	Shak	sopee 				L MN _	55	379 		
2.	FEC IDENTIFICATION NUM	IBER	~	CITY 🛕			STATE	Z	IPCODE .	L	
	C00437061		;	3. IS THIS REPOR		NEW (N) OR	X	AMENDED (A)			
4.	TYPE OF REPORT (Choose One)	()	Monthly Report Due On:	Feb 20 (M		May 20 (M5)	H	Aug 20 (M8)	Year	20 (M11) n-Election Only) 20 (M12)	
	(a) Quarterly Reports: April 15 Quarterly Report(Q1			Mar 20 (M	3)	Jun 20 (M6)	Щ	Sep 20 (M9)	(Nor	n-Election Only)	
				Apr 20 (M	4)	Jul 20 (M7)	X	Oct 20 (M10)	Jan	31 (YE)	
			(c) 12-Day		Primary (1	2P)	Gene	eral (12G)	Run	Runoff (12R)	
	July 15 Quarterly Report(Q		PRE-Election				Special (12G)				
	October 15 Quarterly Report(Q3 January 31 Quarterly Report(YE July 31 Mid-Year Report(Non-election Year Only) (MY) Termination Report (TER)	(3)	Report for the	ne:	Convention	n (12C)					
		E)	E	Election on					in the State of	L,	
		" `	(d) 30-Day Post -Elect Report for the		General (3	General (30G)		off (30R)	OR) Special (30S) in the State of		
			·	Election on							
5.	Covering Period 0.9	9	01 200	В	through	0 9	3 0	2008			
	rtify that I have examined this I	•			e and belief it	is true, correct	and comp	ete.			
Тур	e or Print Name of Treasurer	Ruti	h Ann Michnay, F	<u>'A</u>							
Sig	nature of Treasurer Electron	nically Fil	led by Ruth An	n Michnay, F	PA		Date	12 10	200	8	
NO	TE : Submission of false, error	neous, or	incomplete inform	nation may :	subject the pe	erson signing th	is Report t	o the penalties o	of 2 U.S.C 4	37g.	
	Office Use							I	FORM 3	X	

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